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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 10/521,220 Application Number CHANGE OF 1/11/2005 **CORRESPONDENCE ADDRESS** Filing Date **Aspray** Application First Named Inventor Art Unit Address to: Commissioner for Patents Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450 ARD118USA Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: The address associated with 24339 Customer Number: OR Firm or Individual Name Address Zip State City Country Email Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 33,788 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Signature Typed or Printed Joel D. Skinner, Jr. Name Telephone 715-386-5800 Date May 20, 2005 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(a) are required. Submit multiple forms if more than one signature is required, see below \_farms ere submitted

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